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<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/584,310		Filing Date 23 June, 2006		<input type="checkbox"/> To be Mailed					
				Applicant(s) OKAZAKI, KOJI						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 06/23/2006		AFTER SEC. AMENDMENT 09/06/2006		*		*		*		
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